ANTENATAL CARE 10 T SERVICES WITH PREGNANT WOMEN'S SATISFACTION

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ABSTRACT

Antenatal care (ANC) is a service provided by health workers to mothers during pregnancy by established standards. Health services will be effective if pregnant women are satisfied with the services provided by midwives. This research aims to determine the Correlation between ANC 10 T services and the satisfaction of pregnant women at the Patumbak Community Health Center. The type of research used is quantitative with a cross-sectional approach and analytical design. Sampling was carried out by purposive sampling with a total sample of 48 TM III pregnant women. The research results showed that most of the 10 T ANC services were carried out completely, namely 34 pregnant women (70.8%), the satisfaction of pregnant women when carrying out ANC examinations. Most pregnant women were satisfied with the services provided by midwives, namely 32 pregnant women (66.7%). The chi-square test showed that there is a Correlation between the 10 T Antenatal Care service and the satisfaction of pregnant women at the Patumbak Community Health Center with a p-value of 0.000 < 0.05. It is hoped that health workers will improve the quality of ANC services so that mothers who undergo ANC feel satisfied with the services provided.
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Keywords*: ANC ; Satisfaction ; Pregnant Women*

INTRODUCTION

Pregnancy is a process that starts from conception and develops until the fetus is full-term, 280 days or 38-40 weeks will give birth (1). *Antenatal care* (ANC) refers to services offered by health workers to pregnant women according to predetermined guidelines (2).

The government stipulates that the ANC services provided must be of high quality and in accordance with the integrated ANC standards (10 T), namely: Weight Weighing (BB) and Height (TB), Blood Pressure (TD) measurement, Upper Arm Circumference (LILA) measurement, Uterine Peak Height (TFU) measurement, determining the lowest part or presentation of the fetus and calculating the Fetal Heart Rate (DJJ), determining the mother's toxoid immunization status, giving blood supplement tablets (at least 90 tablets) during pregnancy, laboratory test services, managing problems or complications, and conducting talks or counseling (3).

Health services for pregnant women must meet the frequency of at least 6 ANC times and 2 times to the doctor. ANC is carried out at least 1 time in the First Trimester (TM I) (0-12 weeks), 1 time in the Second Trimester (TM II) (12-24 weeks), and 3 times in the Third Trimester (TM III) (24 weeks until before delivery), 2 times checked by a doctor during the First Visit (K1) in TM I and the Fifth Visit (K5) at TM III (4).

ANC aims to detect and manage complications during pregnancy and monitor the well-being of the mother and her fetus (5). Lowering the Maternal Mortality Rate (MMR), preventing postpartum bleeding, premature delivery, and anemia are the benefits of ANC (6).

Globally, 87% of pregnant women receive ANC services once, and 65% have four visits (7). In some countries such as Burundi, Chad, Ethiopia, Mali and Rwanda, there are fewer than

50% of women who have 6 ANC visits (8). ANC 10 T service coverage in Association of Southeast Asian Nations (ASEAN) countries such as Cambodia (28.2%), the Philippines (44.2%) and Myanmar (45.5%) (9).

The results of Basic Health Research (Riskesdas) stated that 10 T antenatal services increased from 70% in 2013 to 74.1% in 2018 (10). Whether or not the health services of pregnant women are successful or not can be seen from K1, the fourth visit (K4), and the sixth visit (K6). K1 coverage in Indonesia in 2021 was 98%, and K4 was 88.8%, an increase compared to the previous year. The target of the 2021 National Medium-Term Development Plan (RPJMN) has been achieved 88.8% of the target of 85%. The provinces with the highest results are DKI Jakarta at 114.5%, West Java (98.8%) and Banten (95.7%). The provinces with the lowest results are Papua and West Papua with results below 50%. Health services for K6 pregnant women in Indonesia reached 63%, North Sumatra became the highest province with a result of 84.6%, Banten Islands (84.2%) and Bangka Belitung (82.8%) (4).

The coverage of ANC 10 T services in North Sumatra in 2021-2022 has decreased, in 2021 K1 was 92.0%, K4 84.2% and K6 84.6%. Likewise, in 2022 K4 reached 83.1% and K6 81.1%. The adaptation of the COVID-19 pandemic in 2022 had an impact on the decline in OSH 4, as almost all routine services, including maternity health services, were still subject to various restrictions in the previous year (11). ANC 10 T services in 2019-2021 in Deli Serdang Regency tend to fluctuate (up and down). In 2019, K1 and K4 decreased compared to the previous year, namely K1 98.58%, K4 by 93.04% and in 2020 there was also a decrease to 97.78% and 90.92%. Likewise, in 2021 K1 was 97.40%, K4 increased to 94.26%. In 2022, K1 is 98.24%, K4 is 94.89%, and K6 is the same as K4, which is 94.89%. ANC 10 T coverage at the Patumbak Health Center in 2020 also decreased when compared to 2019, K1 92.78% and K4 89.71%. In 2021, K1 was 95.51%, K4 was 98.24%, while in 2022 K1 was 99.87%, K4 was 99.13% and K6 was 99.13% (12).

One of the causes of the decrease in the coverage of ANC visits is services that have not met the requirements that must be provided during the visit, thus affecting the level of satisfaction of pregnant women. The number of ANC visits will decrease if patients are dissatisfied with the services received. Patient satisfaction is a very important factor (13). Health services will be effective if pregnant women are satisfied with the services received by midwives (14).

The level of satisfaction of pregnant women can be seen with 5 indicators, namely Reliability (reliability), for example, the right examination services, treatment and treatment, the schedule of carrying out the correct service procedures and uncomplicated service procedures. Responsives, such as the ability of midwives to respond to patient complaints, with staff who provide clear and easy-to-understand information and act quickly when patients need it. Assurance (certainty/guarantee) for example knowledge and ability to determine diagnosis, polite and friendly service, complete safety guarantee and confidence in social status. Empathy (empathy) for example: giving special attention to each patient, caring for patient complaints, serving all patients regardless of their status. Tangibles (Existing facilities) such as the cleanliness and comfort of the room, internal and external layout, completeness, cleanliness of the appearance of health workers (15). Research (16) with the title The Relationship of Antenatal Care Midwifery Services to Patient Satisfaction at Az-Zahra Primary Clinic showed that the level of satisfaction of pregnant women related to tangibles as many as 40 respondents (43.0%) said they strongly agreed, regarding realibility, 42 respondents (45.0%) strongly agreed, responsiveness 45 respondents (46.7%) strongly agreed, assurance 40 respondents (43.0%) strongly agreed, empathy as many as 39 respondents (37.0%) strongly agreed. The chi-square analysis showed a p-value of 0.000 (<0.05), meaning that there was a relationship between antenatal care midwifery services and patient satisfaction.

An initial survey conducted by researchers in November 2023 at the Patumbak Health Center on pregnant women who had carried out ANC services had 7 pregnant women and 3 were not satisfied with the services provided.

Based on the description above, satisfaction is the most important component of ANC services. Therefore, the author is interested in conducting research on the Relationship between ANC 10 T Services and Pregnant Women's Satisfaction at the Patumbak Health Center.

Research Objectives

To find out the Relationship between ANC 10 T Services and Pregnant Women's Satisfaction at the Patumbak Health Center.

METHOD

The type of research used is quantitative with an analytical design with a cross sectional approach. The selection of the sample was carried out using purposive sampling, the population in this study was 92 pregnant women with KI in July 2023. I took KI in June because at the time I collected the gestational age data it was already in the third trimester. The tool for data collection is a questionnaire. The data that has been collected are processed by univariate and bivariate analysis.

RESULTS

Univariate Analysis

The results of the study are known to have the frequency distribution of ANC 10 T services in the following table.

Table 1. Frequency Distribution of Respondents Based on ANC 1O T Services

No	ANC 10 T Service	Sum	
		f	%
1	Incomplete <10 T	14	29,2
2	Complete	34	70,8
Total		48	100

Based on Table 1, it shows that 34 pregnant women (70.8%) were pregnant women with Complete 10 T ANC services, while 14 pregnant women (29.2%) were incomplete.

Table 2. Distribution of Respondent Frequency Based on Pregnant Women's Satisfaction

No	Pregnant Women's Satisfaction	Sum	
		f	%
1	Dissatisfied	16	33,3
2	Satisfied	32	66,7
Total		48	100

In table 2, it is known that out of 48 respondents there are 16 pregnant women (33.3%) who are not satisfied with the services provided.

Bivariate Analysis

Table 3. ANC 10 T Service Relationship with Pregnant Women's Satisfaction

No	ANC 10 T Service	Pregnant Women's Satisfaction						p value
		Dissatisfied		Satisfied		Total		
		f	%	f	%	f	%	
1	Incomplete <10 T	12	85,7	2	14.3	14	100	0,000
2	Complete	4	11,8	30	88,2	34	100	
	Total	**16**	**33,3**	**32**	**66,7**	**48**	**100**	

Table 3 shows that the respondents in the ANC 1O T service group with an incomplete category of < 10 T and the satisfaction of pregnant women with the dissatisfied category were 12 respondents (85.7%) and the respondents in the ANC 10 T service group with an incomplete category of < 10 T and the satisfaction of pregnant women with the satisfied category of 2 respondents (14.3%).

In the ANC 10 T service group with a complete category and satisfaction of pregnant women with a dissatisfied category as many as 4 respondents (11.8%), the ANC 10 T service group with a complete category and satisfaction of pregnant women with a satisfied category as many as 30 respondents (88.2%).

After data analysis using the chi square test, a significance value of p value 0.000 < 0.05 was obtained as the set level (p<0.05), it can be concluded that there is a relationship between Antenatal Care 10 T services and Pregnant Women's Satisfaction.

DISCUSSION

1. Antenatal Care 10 T Service

Based on the analysis of the data in table 1, it can be seen that the majority of ANC 10 T services at the Patumbak Health Center are complete, namely 34 pregnant women and 14 incomplete pregnant women. All pregnant women who need help during their pregnancy can access a comprehensive and high-quality integrated ANC service, which is offered in conjunction with other programs. Therefore, to provide high-quality antenatal services, antenatal services must be carried out regularly, in accordance with standards, and integrated (17).

This is in line with research (18) on "Overview of the Completeness of Integrated Antenatal Care at the Tepus II Gunungkidul Health Center" which showed that 144 pregnant women (72%) performed ANC with 10 T, while pregnant women who performed ANC incomplete as many as 57 people (28%). This study is also in line with (19) regarding "The Relationship between Midwifery Services and Attitudes with the Implementation of the 10 T Program in Antenatal Care (ANC) Services at the Hamparan Perak Health Center", which shows that of the 36 respondents studied, as many as 28 (77.78%) respondents received complete ANC and 8 (22.22%) respondents received incomplete ANC. Thus, the implementation of the ANC is quite good.

Mumu's research in (20) shows that to improve the competence of midwives in providing antenatal services, midwives must monitor themselves when providing services in accordance with Standard Operating Procedures (SOPs). This will increase midwifery compliance in providing antenatal services. Standard surgical procedures to ensure patient satisfaction are guaranteed, i.e. offering health care assurance in the form of persuasive attitudes, proof of motivation, and suitability in a variety of health services, all of which of course create unique value that every patient can truly trust. The achievement of quality ANC services will be assisted by the implementation of SOPs by midwives in ANC services. In order for pregnant women to have a healthy pregnancy, give birth safely, and have a high-quality baby, the quality of antenatal services (ANC) refers to the accuracy and quality of examinations carried out during pregnancy in accordance with the established antenatal service standards (21).

2. Pregnant Women's Satisfaction

According to (22) satisfaction is the level of feeling that patients have about the health care performance they receive after comparing it to what is expected. One measure of service quality is patient satisfaction (23). Because a person's level of satisfaction affects whether he thinks that the service he receives is of high quality or not. Respondents who receive health services may feel more satisfied if the services are of high quality. On the other hand, poor quality healthcare will give the impression that you are not satisfied with your healthcare services. so that operators of high-quality healthcare facilities can continue to operate to a high standard, to please their clients, and to improve the quality of their offerings (24).

Table 2 shows that of the 48 respondents, as many as 32 pregnant women (66.7%) were satisfied with the ANC services they received, while 16 (33.3%) were dissatisfied. This is also in line with research (25) on "Analysis of the Quality of Antenatal Care (ANC) Services on the Level of Satisfaction of Pregnant Women in Midwifery Polyclinics" which examines the dimension of ANC service satisfaction. Of the 83 respondents, 68 pregnant women (81.9%) were satisfied and 15 (18.1%) were dissatisfied.

The findings from the study (26) on "Overview of Pregnant Women's Satisfaction with ANC Services at the Niar Primary Clinic in Deli Serdang Regency in 2018" are in line with this study, out of 39 respondents, 33 (84.6%) expressed satisfaction and 6 (15.4%) expressed dissatisfaction. The results of the study "The Relationship Between Pregnant Satisfaction ANC Services with ANC Interest" (27) also support this study. Of the 41 respondents, 38 (92.68%) pregnant women were satisfied with ANC services, while 3 (07.32%) were not satisfied.

Pregnant women's satisfaction can be measured using 5 indicators: the first is reliability, which includes things like check-up services, care, and scheduling of proper and simple service procedures. Respondents, such as midwives' ability to handle patient complaints, employees who provide information that is easy for patients to understand and take prompt action when needed. Assurance includes things like diagnostic expertise and skills, courteous and good service, total security guarantees, and social status trust. Empathy can be demonstrated by treating each patient with exceptional care, listening to their complaints, and providing care to all patients, regardless of their circumstances.

Tangibles (current facilities) include things like the comfort and cleanliness of the room, its

interior and exterior design, its fittings, and the appearance of medical staff (15).

3. The relationship between ANC 10 T services and Pregnant Women's Satisfaction

From the results of statistical analysis using the Chi Square test, a p-value of 0.000 ($p<0.05$) was obtained and Ha was accepted. This shows that there is a significant relationship between the satisfaction of pregnant women at the Patumbak Health Center, Deli Serdang Regency and the Antenatal Care 10 T service. This study supports the findings of "The Relationship between Antenatal Care (ANC) Services and Pregnant Women's Satisfaction in the Working Area of the Tanjungkerta Health Center" (28). The study found a P-Value of 0.000 for the relationship between ANC Services and Pregnant Women's Satisfaction in the Tanjungkerta Health Center Work Area in 2022. Research conducted in 2019 by (29) on "The Relationship between Antenatal Service Quality and Pregnant Women's Satisfaction Levels" is also in line with this research. The findings of the study showed that there was a relationship between the quality of ANC services and the level of satisfaction of pregnant women with a p-value=0.000 which showed that the relationship existed.

The research "The Relationship between the Implementation of Antenatal Care (ANC) Standards and the Level of Satisfaction of Pregnant Women in Puksesmas Ciamis" (30) shows how the distribution of ANC implementation is not carried out from the perspective of pregnant women, the absence of laboratory examinations, TT immunization screening, and nutritional status assessment by measuring LILA. Pregnant women reported a satisfaction rate of 87.5%, with the number of satisfied mothers as many as 63 people, dissatisfied as much as 5.9%, and dissatisfied as much as 4.6%. Meanwhile, based on a statistical test using the Spearman Rank test and obtained a value of p= 0.000, Spearman's Rho 0.482. Bivariate analysis showed that there was a relationship between the implementation of antenatal care (ANC) service standards and the level of satisfaction of pregnant women.

CONCLUSION

There is a Relationship between Antenatal Care 10 T Services and Pregnant Women's Satisfaction at the Patumbak Health Center. To ensure that mothers who receive ANC are satisfied with the services they receive, midwives must improve the quality of ANC services and increase compliance in providing ANC 10 T services in accordance with the guidelines for every pregnant woman.

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